FORM D

421807

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SEC Mail Processing Section

FORM D

NOTICE OF SALE OF SECURITIES MAY 16 2008 **PURSUANT TO REGULATION D.** SECTION 4(6), AND/OR

Washington, DC UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

3235-0076 OMB Number:

April 30, 2008 Expires

Estimated average burden hours per response:

16.00

SEC USE ONLY							
Prefix		Serial					
	DATE R	ECEIVED					

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	dment and name has changed, and indicate change.)	
Goldman Sachs Global Manager Strate	gies Managed Portfolios, L.L.C.: Limited Liabili	
Filing Under (Check box(es) that apply):] Rule 504 □ Rule 505 ☑ Rule 506	☐ Section 4(6) ☐ ULOE
Type of Filing: ☐ New Filing ☑ Ame	endment	
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the		
Name of Issuer (☐ check if this is an amen	1 ALEXA BOUNTALA BEAU KALU UMU NELEKAMENCI OLD	
Goldman Sachs Global Manager Strate	gies Managed Portfolios, L.L.C.	08048732
Address of Executive Offices	(Number and Street, City, State Zip Code)	Telephone Number (including Area Code)
One New York Plaza, New York, New	(212) 902-1000	
Address of Principal Business Operations (if different from Executive Offices)	Telephone Number (Including Area Code)	
Brief Description of Business		
To operate as a private investment fund	l.	PROCESSED
T - CD - t O t t t		N /
Type of Business Organization		MAY 2 2 2008
□ corporation	☐ limited partnership, already formed	MAY 2 2 2008 ☑ other (please specify):
-	☐ limited partnership, already formed☐ limited partnership, to be formed☐	MAY 222008 ☑ other (please specify): Limited Liability THONSON REUTERS
☐ corporation	• • •	other (please specify):
☐ corporation	☐ limited partnership, to be formed Month Year	other (please specify):
☐ corporation ☐ business trust	Organization: Imited partnership, to be formed	✓ other (please specify): Limited Liability THOWSON REUTERS ✓ Actual □ Estimated
☐ corporation ☐ business trust Actual or Estimated Date of Incorporation or	Organization: Imited partnership, to be formed	✓ other (please specify): Limited Liability THOWSON REUTERS ✓ Actual □ Estimated tion for

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA								
2. Enter the information requested for the following:								
* Each promoter of the issuer, if the issuer has been organized within the past five years;								
* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;								
* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and								
* Each general and managing partner of partnership issuers.								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ General and/or								
Managing Partner								
Full Name (Last name first, if individual)								
Goldman Sachs Asset Management, L.P. (the Issuer's Managing Member)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
One New York Plaza, New York, New York 10004								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer* ☐ Director ☐ General and/or * of the Issuer's Managing Member Managing Partner								
Full Name (Last name first, if individual)								
Asali, Omar M.								
Business or Residence Address (Number and Street, City, State, Zip Code)								
One New York Plaza, New York, New York 10004								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director ☐ General and/or * of the Issuer's Managing Member Managing Partner								
Full Name (Last name first, if individual)								
Barbetta, Jennifer								
Business or Residence Address (Number and Street, City, State, Zip Code)								
One New York Plaza, New York, New York 10004								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director ☐ General and/or * of the Issuer's Managing Member Managing Partner								
Full Name (Last name first, if individual)								
Gottlieb, Jason								
Business or Residence Address (Number and Street, City, State, Zip Code)								
One New York Plaza, New York, New York 10004								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer* ☐ Director ☐ General and/or * of the Issuer's Managing Member Managing Partner								
Full Name (Last name first, if individual)								
Ort, Peter								
Business or Residence Address (Number and Street, City, State, Zip Code)								
One New York Plaza, New York, New York 10004								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director ☐ General and/or * of the Issuer's Managing Member Managing Partner								
Full Name (Last name first, if individual)								
Ross, Hugh M.								
Business or Residence Address (Number and Street, City, State, Zip Code)								
One New York Plaza, New York, New York 10004								
Check Box(es) that Apply:								
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								

	· · · ·	··		B. IN	FORMAT	ION ABO	UT OFF	ERING					
			•							•	Yes	No	
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								***************************************		Ø			
Answer also in Appendix, Column 2, if filing under ULOE.													
2. What i	is the minim	um investn	ent that wil	l be accepte	ed from any	individual?	,				\$	*	
2. What is the minimum investment that will be accepted from any individual?*The Issuer's Managing Member may in its sole discretion accept subscription amounts in whatever amount it								mount it	4				
determines is acceptable.													
										Yes	No		
3. Does t	he offering	permit joint	ownership	of a single	unit?								
 Does the offering permit joint ownership of a single unit?									ectly, any				
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering.										offering.			
If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such													
	es, list the fi er or dealer,							u are associ	ateu person	is of such			
	(Last name	· ·			-								
	•		ŕ										
Goldman,	Sachs & C	0.*											
*Although	h the securi	ties will be	sold throug	gh Goldma	n, Sachs &	Co., no con	mmissions	will be paid	, directly o	r indirectly,	, for solicit	ing any	
	in any jur			0 0.	0 7:		•						
Business o	or Residence	Adaress (i	Number and	Street, City	y, State, Zip	Code							
	Street, Nev			004					· <u>·</u>				
Name of A	Associated E	Broker or De	ealer										
States in V	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers							
	All States"										🗹 All States		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name	(Last name	first, if ind	ividual)										
Business of	or Residence	Address ()	Number and	Street, City	v. State. Zip	Code)			-				
		(,,	,,,	,							
Name of A	Associated E	roker or De	ealer					· · · · · · ·					
States in V	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers				-			
	All States" of										🗆 Al	1 States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name	(Last name	first, if ind	ividual)										
Business o	r Residence	Address (1	Number and	Street, City	y, State, Zip	Code)							
Name of A	Associated E	roker or De	ealer										
States in V	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers							
(Check ".	All States" o	or check inc	lividual Stat	es)			***************			***************************************		All States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	(WI)	[WY]	(PR)	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

I.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security		Aggregate Offering Price	Amount Already Sold
	Debt	\$_	0	\$ 0
	Equity	\$	0	\$ 0
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants)	\$_	0	\$ 0
	Partnership Interests	\$	0	\$ 0
	Other (Specify): Limited Liability Company Units	\$	14,497,219,142	\$ 14,497,219,142
	Total	\$	14,497,219,142	\$ 14,497,219,142
	Answer also in Appendix, Column 3, if filing under ULOE.	_		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number	Aggregate Dollar Amount
			Investors	Of Purchases
	Accredited Investors	_	5,667	\$ 14,497,219,142
	Non-accredited Investors	_	0	\$ 0
	Total (for filings under Rule 504 only)	_	N/A	\$ N/A
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.			
	Type of offering		Type of Security	Dollar Amount Sold
	Rule 505		N/A	\$ N/A
	Regulation A	_	 N/A	\$ N/A
	Rule 504	-	N/A	\$ N/A
	Total	_	N/A	\$ N/A
ti ti	.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of n expenditure is not known, furnish an estimate and check the box to the left of the estimate.	-		
	Transfer Agent's Fees			\$ 0
	Printing and Engraving Costs			\$ 0
	Legal Fecs		Ø	\$ 1,261,499
	Accounting Fees			\$ 0
	Engineering Fees.		o o	\$ 0
	Sales Commissions (specify finders' fees separately)			\$ 0
	Other Expenses (identify)			\$ 0
	Total		Ø	\$ 1,261,499

C CULTURAL OF THE STATE OF THE	DANCE OF BUILDINGS BY	MENIO	EC.	ND HEE OF B	DOCE	ene		
b. Enter the difference between the aggregat - Question 1 and total expenses furnished in difference is the "adjusted gross proceeds to the content of the c	response to Part C - Question 4.a	Part (C is	and use of r	KULE.		14,495,957,643	
 Indicate below the amount of the adjusted gr to be used for each of the purposes shown. I furnish an estimate and check the box to t payments listed must equal the adjusted gross to Part C - Question 4.b. above. 	f the amount for any purpose is not the left of the estimate. The total	knowr of th	n, ie		* -		4,422,727,942	
				Payments to Officers, Directors, & Affiliates			Payments To Others	
Salaries and Fees			\$_	0		\$_	0	
Purchase of real estate		Ō	\$_	0		\$_	0	
Purchase, rental or leasing and installation of	machinery and equipment		\$_	0		\$_	0	
Construction or leasing of plant buildings and	Construction or leasing of plant buildings and facilities				_ 🗆	\$	0	
Acquisition of other businesses (including the this offering that may be used in exchange another issuer pursuant to a merger)	for the assets or securities of		\$	0	_	\$	0	
Repayment of indebtedness			\$	0		\$	0	
Working capital			\$ \$	0		\$	0	
Other (Specify): Limited Liability Company			-		- <u>-</u> ☑	\$	14,495,957,643	
Column Totals			\$ -		- ☑	\$	14,495,957,643	
Total Payments Listed (column totals added)	14,495,	495,957,643						
	D. FEDERAL SIGNATU	RE						
The issuer has duly caused this notice to be signal following signature constitutes an undertaking be of its staff, the information furnished by the issue	y the issuer to furnish to the U.S. So	curiti	es an	d Exchange Com	mission,	upor		
ssuer (Print or Type) Goldman Sachs Global Manager Strategies Managed Portfolios, L.L.C.	Signature David / Le	cer	T	Date May 14, 2008		•		
Name of Signer (Print or Type)	Title of Signer (Print or Type)							
vid Kraut Assistant Secretary of the Issuer's Managing Member								

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

END